(c) if so, the reasons therefor; and

(d) by when Government propose to complete the construction of the said building?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) Yes, Sir. Foundation stone for expansion and upgradation of the casualty and emergency services of Dr. RML Hospital has been laid on 31st December, 2001 by Union Minister for Health and Family Welfare.

(b) and (c) The proposed drawings of the building were sent to Delhi Urban Art Commission (DUAC) on 18.1.2002 for approval. DUAC has given their clearance and the same has been sent to NDMC for approval.

(d) The construction of the building will be completed within 17 months of its commencement.

Female foeticide

4810. SHRI K.M. KHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that a large number of female foeticide take place in the country;

(b) if so, the number of female foeticide cases brought to notice of Government during the last five years, State-wise;

(c) whether such cases have been detected mainly in private and unrecognized hospitals; and

(d) if so, the measures taken by Government to stop this heinous crime?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) The Census 2001 has revealed that sex ratio in the age group of 0-6 years has declined from 945 in 1991 to 927 in 2001. Some of the reasons adduced for the same are:—

1. son preference;
2. neglect of the girl child resulting in their higher mortality at younger age;
3. female infanticide;

4. female foeticide; and

5. male bias in enumeration of population.

Admittedly, female foeticide is one of the reasons for decline in sex ration, but this activity is pursued in a clandestine manner and therefore no specific data is available. States/UTs-wise details of cases of foeticide during the last five years i.e. from 1997 to 2001 (upto available months), reported by National Crime Record Bureau are enclosed as statement (*See* below). However, figures for male and female foeticide are not available, separately.

(d) with a view to contain the menace of female foeticide, Government has enacted and brought into force the Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 (PNDT Act) with effect from 1.1.1996. The implementation of the provisions of the Act rests with the States/ UTs. The Supreme Court of India has also isued directions to both Central and State Governments for implementation of the Act.

The Central Government has requested all the State Governments/UTs to implement the provisions of the Act and comply with the directions of the Hon'ble Supreme Court of India with full vigor and zeal. Appropriate Authorities and Advisory Committees have been appointed under the Act in all the States/ UTs. These have been appointed at district and at some places at sub-district levels in most of the States/UTs. They are taking action to generate awareness about the provisions of the Act in public and among law enforcing agencies, service providers, medical and para-medical personnel by hoardings, wall paintings, news papers, All India Radio, TV and other means of publicity. The Central Government has constituted a Central Supervisory Board under the chairmanship of Minister for Health and Family Welfare. Quarterly returns about the implementation of the Act and compliance with the directions of the Supreme Court of India are obtained from State Governments/UTs by the Central Supervisory Board (CSB).

In order to sensitize the Appropriate Authorities appointed in various States and Union Territories for the implementation of the Act, regional workshops are being organized.

A list of over 11,000 buyers of ultrasound machines received from the manufacturers, impoters, suppliers, dealers, service providers etc. of such machines has been forwarded to the States/U.Ts for ensuring registration of the persons/bodies using them including sealing and seizure of the machines of unregistered clinics.

Statement

Incidence of foeticide during 1997 to 2001 (up to available months)

	State/UT	1997	1998	1999	2000	2001	Fig. for the year 2001 are up to month of
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1.	Andhra Pradesh	0	0	3	8	6	Dec.
2.	Arunachal Pradesh	1	0	0	0	0	Jul.
3.	Assam	0	0	0	0	0	Dec.
4.	Bihar	4	2	4	1	0	Dec.
5.	Chhattisgarh	NE	NE	NE	NE	NA	—
6.	Goa	0	0	0	0	0	Dec.
7.	Gujarat	0	1	7	0	3	Dec.
8.	Haryana	3	12	9	13	7	Dec.
9.	Himachal Pradesh	1	1	1	0	0	Dec.
10.	Jammu & Kashmir	0	1	1	0	0	Dec.
11.	Jharkhand	NE	NE	NE	NE	NA	—.
12.	Karnataka	0	0	0	1	0	Dec.
13.	Kerala	0	0	0	0	0	Dec.
14.	Madhya Pradesh	21	12	17	14	7	Dec.
15.	Maharashtra	19	25	13	41	22	Dec.
16.	Manipur	0	0	0	0	0	Dec.
17.	Meghalaya	0	0	0	0	0	Nov.
18.	Mizoram	0	0	0	0	0	Dec.
19.	Nagaland	0	0	0	0	0	Dec.
20.	Orissa	0	0	0	1	0	Apr.
21.	Punjab	0	2	3	0	3	Dec.
22.	Rajasthan	3	4	3	9	6	Dec.
23.	Sikkim	0	0	0	0	0	Nov. (Jun., July, Sep.)
24.	Tamil Nadu	0	0	0	0	0	Dec.
25.	Tripura	0	0	0	0	0	Dec.
26.	Uttaranchal	NE	NE	NE	NE	0	Dec.
27.	Uttar Pradesh	0	0	0	0	0	Nov.
28.	West Bengal	0	0	0	0	0	Dec.
	TOTAL (STATES)	52	60	61	88	54	
29.	A & N Islands	0	0	0	0	0	Dec.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
30.	Chandigarh	2	0	0	1	0	Dec.
31.	D & N Haveli	0	0	0	0	0	Dec. (Oct.)
32.	Daman & Diu	0	0	0	0	0	Dec. (Apr., Aug.)
33.	Delhi	3	2	0	2	0	Dec.
34.	Lakshadweep	0	0	0	0	0	Dec.
35.	Pondicherry	0	0	0	0	0	Dec.
	TOTAL (UTs):	5	2	0	3	0	
TOTAL (All India):		57	62	61	91	54	

Source : Monthly Crime Statistics.

Note : Fig. are provisional NE stands for Not Exist and NA stands for Not Available.

Bracketed month name indicates non-availability of data for that month.

Emergency services in CGHS health centres in Delhi

†4811. SHRI DEVI PRASAD SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to make arrangements for emergency medical services in C.G.H.S. health centres in Delhi;

(b) whether it is a fact that specialist doctors are not available in these centres as a result of which most of the patients are sent to hospitals; and

(c) if so, the concrete steps being taken for the upgradation of these dispensaries?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) There are 87 Allopathic dispensaries functioning under CGHS Delhi, out of which 42 are functioning round-the-clock for providing emergency services in addition to routine working hours from 7.30 A.M. to 1.30 P.M. on working days in shift duties. The single shift dispensaries are attached with the functioning dispensaries for extending emergency services. Moreover, there are five First-Aid-Posts in CGHS Delhi attached to the Government offices for providing emergency services to the office goers during the normal office working hours.

†Original notice of the question was received in Hindi.